

**Seattle Fire Marshal's Office**

220 3rd Avenue South, 2nd Floor
Seattle, WA 98104
(206) 386-1450

REPLACEMENT CARD**FIRE AND LIFE SAFETY CERTIFICATION****Fee per Replacement Card: \$55****OFFICE USE ONLY**

Original Card Exp. Date:	Date Paid:
Test Period Exp. Date:	Check Number:
Fee Paid:	Receipt Number:

SECTION 1: TECHNICIAN INFORMATION

First Name: _____ Middle Initial: _____
Last Name: _____ Sex: ☐ Male ☐ Female
Certificate #: _____ - _____ (leave blank for 1st time applicants)
Date of Birth: _____ Phone: _____
Address: _____
City: _____ State: _____ Zip: _____
Driver's License # _____
Email: _____

SECTION 2: COMPANY INFORMATION

Company Name: _____
Supervisor Name: _____
Company Address: _____
City: _____ State: _____ Zip: _____
Work Phone: _____
Email: _____
Where would you like your card/results mailed?
(check one) ☐ Home ☐ Work

SECTION 3: TYPE OF TEST/CERTIFICATE**Automatic Sprinklers:**

- ☐ AS-ITT (S)
☐ AS-2 (S)
☐ AS-3 (S)

Fire Pump Systems:

- ☐ FP-1
☐ FP-ITM

Engineered Systems:

(Includes Pre-Engineered Systems)

- ☐ E-1
☐ E-2
☐ E-3
☐ E-4

Standpipe System:

- ☐ STP-ITM

Emergency Generators:

- ☐ EG-1
☐ EG-ITM

Fire Extinguishers:

- ☐ FEX-1
☐ FEX-2
☐ FEX-3
☐ FEX-4

Fire Alarm Systems:

- ☐ FA-1
☐ FA-ITM

Smoke Control System:

- ☐ SC-1
☐ SC-ITM

SECTION 4: CUSTOMER ACKNOWLEDGMENTS**General Customer Responsibilities**

I hereby certify that all of the information on this form is true and correct to the best of my knowledge. I understand that any false statements or misrepresentation made in this application are cause for denial, suspension, or revocation of the fire and life safety certificate. I also understand that the certificate issued to me remains the property of the Seattle Fire Department and I agree to surrender the certificate upon demand of the Chief of the Fire Department or his/her authorized representative. I understand that the laws and standards governing the certificate for which I am applying periodically change and that I am responsible for monitoring and complying with those changes. I understand that it is the responsibility of certificate holders to keep their certificate up to date, and that it is a criminal law violation to perform any of the work regulated by Seattle Fire Department Administrative Rule 9.01 without first having a valid certificate. _____ (initials)

Sprinkler Affidavit (for Automatic Sprinkler Certificate Holders Only)

I hold a valid Washington State issued Certification of Competency for work on sprinkler systems. I understand that it is my responsibility to maintain a valid State Issued Certification of Competence, in addition to my SFD Certification, and that I must hold both Seattle and State certification to work on sprinklers in Seattle. _____ (initials) You are required to attach a current copy. Copy attached: ☐ Yes ☐ No

Fire Alarm Affidavit (for Fire Alarm Certificate Holders Only)

I hold a valid National Institute for Certification in Engineering Technologies Level II Certification in Fire Alarm Systems or Inspection & Testing of Fire Alarm Systems. I understand that it is my responsibility to maintain a current NICET II Certification, in addition to my SFD Certification, and that I must hold both Seattle and NICET certification to work on fire alarms in Seattle. _____ (initials) You are required to attach a current copy. Copy attached: ☐ Yes ☐ No

My signature indicates that I have read and understand the above.

SIGNATURE

DATE